



Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

**School District Claim for
State Reimbursement for
Individual and Isolated Transportation**

State ☐
District ☐
County ☐

DUE DATES:	First Semester	Second Semester
	February 1 to County Superintendent February 15 to State Superintendent	May 10 to County Superintendent May 24 to State Superintendent
COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:		

This claim is for the period beginning _____, 20____ and ending _____, 20____.
month day month day

CERTIFICATION:

The information on this form is complete and accurate to the best of my knowledge.

Date			Signature, Chair, Board of Trustees		
County: 06 Carter			District: 0078 Hawks Home Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1203	No	McCutchan, Vicky	4.00	_____
1	1211	No	Lambert, Kara	3.00	_____
1	1213	No	Price, Joy	1.75	_____
1	1214	No	Waterland, Kellie	5.90	_____
1	1215	Yes	Williams, Jaunita	0.98	_____



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Date			Signature, Chair, Board of Trustees		
County: 06 Carter			District: 0087 Ekalaka Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
15	1193	No	Guyer, Mardee	5.25	_____
15	1194	No	Lesh, Kim	1.50	_____
15	1195	Yes	Lovee, Patricia	0.75	_____
15	1196	No	Schell, Jodi	21.25	_____
15	1210	Yes	Walker, Tracey	0.75	_____
15	2184	Yes	Reynolds, Butch	2.25	_____



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Date			Signature, Chair, Board of Trustees		
County: 06 Carter			District: 0096 Alzada Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
56	1199	No	Lindberg, Kyle M	15.00	_____
56	1204	No	Cole, Cynde S	6.00	_____
56	1205	No	Cole, Don & Jennifer	6.00	_____
56	1206	No	Dinstel, Bruce	7.50	_____
56	1207	No	Sandvick, Lynn	27.00	_____
56	1208	No	Walker, Teresa	1.50	_____
56	1209	No	Walker, Teresa	9.25	_____



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Date			Signature, Chair, Board of Trustees		
County: 06 Carter			District: 0097 Carter County H S		District Level: High School
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
CO	1192	No	Walker, Teresa	15.25	_____
CO	1195	Yes	Lovee, Patricia	0.75	_____
CO	1197	No	Gardner, Kerry	2.00	_____
CO	1198	No	King, Helen	9.25	_____
CO	1200	No	King, Helen	9.25	_____
CO	1201	No	Lambert, Kara	4.00	_____
CO	1202	No	Talcott, Duane	0.50	_____
CO	1204	No	Cole, Cynde S	9.25	_____
CO	1210	Yes	Walker, Tracey	0.75	_____
CO	1212	No	McCutchan, Vicky	4.00	_____
CO	1215	Yes	Williams, Jaunita	0.97	_____
CO	2184	Yes	Reynolds, Butch	2.25	_____
CO	2185	No	Rogers, Wesley & Patricia	0.40	_____